

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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CITY OF LOMPOC  
CITY CLERK'S OFFICE

NAME	(LAST)	(FIRST)	(MIDDLE)
	COSTA	ASHLEY	EVELYN

1. Office, Agency, or Court

Name of Office, Agency, or Court:

City Council of city of Lompoc

Division, Board, District, if applicable:

Your Position:

Council member

► If filing for multiple positions, list additional agency(ies)/  
position(s): (Attach a separate sheet if necessary.)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ County of \_\_\_\_\_

☒ City of Lompoc

☐ Multi-County \_\_\_\_\_

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Assuming Office/Initial Date: 12 / 7 / 2010

☐ Annual: The period covered is January 1, 2009,  
through December 31, 2009.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
December 31, 2009.

☐ Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2009, through the  
date of leaving office.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
the date of leaving office.

☐ Candidate Election Year: \_\_\_\_\_

4. Schedule Summary

► Total number of pages including this cover page: 3

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the  
attached schedules:

Schedule A-1 ☐ Yes - schedule attached  
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached  
Investments (10% or Greater Ownership)

Schedule B ☐ Yes - schedule attached  
Real Property

Schedule C ☒ Yes - schedule attached  
Income, Loans, & Business Positions (Income Other than Gifts  
and Travel Payments)

Schedule D ☐ Yes - schedule attached  
Income - Gifts

Schedule E ☐ Yes - schedule attached  
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this  
statement. I have reviewed this statement and to the best  
of my knowledge the information contained herein and in any  
attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State  
of California that the foregoing is true and correct.

Date Signed 12 / 27 / 10  
(month, day, year)

Signature

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>ASHLEY COSTA</u>

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

LORING WINE COMPANY

ADDRESS (Business Address Acceptable)

1034 Aviation Dr. Lompoc CA 93436

BUSINESS ACTIVITY, IF ANY, OF SOURCE

TASTING ROOM

YOUR BUSINESS POSITION

WINE ROOM MANAGER

GROSS INCOME RECEIVED

☒ \$500 - \$1,000 ☒ \$1,001 - \$10,000 AC  
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

\_\_\_\_\_% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

# SCHEDULE D Income - Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>ASHLEY COSTA</u>
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► NAME OF SOURCE  
The Lompoc Rotary Club  
 ADDRESS (Business Address Acceptable)  
P.O. BOX 792, Lompoc, CA 93438  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
N/A Philanthropy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11/3/10</u>	<u>\$ 18<sup>-</sup></u>	<u>Dinner</u>
<u>11/10/10</u>	<u>\$ 18<sup>-</sup></u>	<u>Dinner</u>
<u>11/17/10</u>	<u>\$ 18<sup>-</sup></u>	<u>Dinner</u>

► NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
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 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

Comments: \_\_\_\_\_